United States District Court

for the

Southern D	vistrict of New York
United Specialty Insurance Company)
))
Plaintiff(s)	-)
v.	Civil Action No. 1:18-cv-03083
Lux Maintenance & Ren. Corp., Cornell University, Rockefeller University, The Society of The New York Hospital, Memorial Hospital for Cancer and Allied Diseases, and Manhattan Eye Ear & Throat Hospital))))
Defendant(s)	-)

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Lux Maintenance & Ren. Corp.

158 Nassau Avenue

Brooklyn, New York 11222

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Richard W. Trotter, Esq. Tannenbaum Helpern Syracuse & Hirschtritt LLP 900 Third Avenue New York, New York 10022

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 4/6/2018 /S/ P. NEPTUNE
Signature of Clerk or Deputy Clerk

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Civil Action No. 1:18-cv-03083

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	*	ne of individual and title, if any)			
was re	ceived by me on (date)	·			
	☐ I personally served	the summons on the individual at	t (place)		
			on (date)	; or	-
	☐ I left the summons	at the individual's residence or us	sual place of abode with (name)		
		of suitable age and discretion who res	n who resides there,		
	on (date) , and mailed a copy to the individual's last known address; or				
	☐ I served the summo	ons on (name of individual)		, who is	
	designated by law to a	accept service of process on behal	f of (name of organization)		
			on (date)	; or	
	☐ I returned the sumn	nons unexecuted because		; or	
	☐ Other (specify):				
	My fees are \$	for travel and \$	for services, for a total of \$	0.00	•
	I declare under penalty	y of perjury that this information i	s true.		
Datas					
Date:			Server's signature		
			Printed name and title		
			. , , , , , , , , , , , , , , , , , , ,		
			Server's address		

Additional information regarding attempted service, etc: